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Editorial: Infant deaths Ind.'s shame

Indiana is above average, but not by a measure of which anyone should be proud: infant mortality.

“Infant mortality is the number of babies who die during the first year of life per 1,000 live births,” says a report by the Indiana State Department of Health. “Infant death is a critical indicator of the health of a population. It reflects the overall state of maternal health as well as the quality and accessibility of primary health care available to pregnant women and infants. The top three causes of infant deaths ... are disorders related to short gestation and low birth weight, congenital anomalies and Sudden Infant Death Syndrome.”

Indiana is far above the national average and has been for quite some time. In 2005, in the United States as a whole, the infant death rate was 6.9 per 1,000 births. By 2011, that figure had fallen to 6.1. Indiana also has seen a drop, albeit a much slower one. In 2005, the state’s rate was 8.0. By 2011, it had only fallen to 7.7. In fact, the Centers for Disease Control and Prevention declared we had the country’s fifth-highest infant mortality rate in 2010.

This tragic phenomenon cuts across all racial barriers.

“A significant disparity is being observed between white and black infant mortality rates. Black infants are 1.8 times more likely to die than white infants,” says the health department. “Black infant mortality rates in Indiana are decreasing considerably; however, white infant mortality rates are increasing.”

In an effort to curb this embarrassment to our state, Gov. Mike Pence signed House Bill 1004 May 4.

“A new state grant program aimed at trying to reduce Indiana’s infant mortality rate is set to start this summer,” reported The Associated Press May 5. “Health officials say the program [known as Safety PIN, for Protecting Indiana’s Newborns] will fund grants to support local programs where women can receive prenatal care, learn about safe sleep practices for children, encourage breastfeeding and help expectant mothers to quit using drugs, alcohol and tobacco. The new state budget includes \$11 million for the program over the next two years, along with \$2.5 million for development of a website to reach at-risk mothers.”

Any movement to tackle this problem should be commended. But let this not be the final step we take. We owe it to ourselves and our children to get this one right. We can’t afford not to.